

COMMISSIONER FOR PATENTS
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION
Date: November 25, 2003
File No. 1100.68757



Sir:

Transmitted herewith for filing is the patent application of
Inventor(s): Yoshihara et al.

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

For: LIQUID CRYSTAL DISPLAY DEVICE

11-25-03
Date

Dail Owen
Express Mail Label No.: EV032735547US

Enclosed are:

- (X) 47 pages of specification, including 19 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- () an unexecuted oath or declaration, with power of attorney.
- () sheet(s) of informal drawing(s).
- (X) 18 sheet(s) of formal drawings(s).
- (X) Assignment(s) of the invention to FUJITSU LIMITED and Assignment Cover Sheet.
- (X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s).
- (X) Information Disclosure Statement, Form PTO-1449 and cited references.
- (X) Claim for Priority and Priority Document.

Fee Calculation For Claims As Filed

- | | | | | | | |
|--------------------------------------|-----------|---|-----------|---|----------|-----------------------------------|
| a) Basic Fee | | | | | | \$ 770.00 |
| b) Independent Claims | <u>2</u> | - | <u>3</u> | = | <u>0</u> | x \$ 86.00 = \$ <u>0</u> |
| c) Total Claims | <u>19</u> | - | <u>20</u> | = | <u>0</u> | x \$ 18.00 = \$ <u>0</u> |
| d) Fee for Multiple Dependent Claims | | | | | | \$ 290.00 = \$ <u>0</u> |
| | | | | | | Total Filing Fee \$ 770.00 |
- () Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$
- (X) A check in the amount of \$ 770.00 to cover the filing fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069.
A duplicate copy of this sheet is enclosed.

Respectfully submitted,

300 South Wacker Drive – Suite 2500
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Telephone: (312) 360-0080
Facsimile: (312) 360-9315
Customer Number 24978

GREER, BURNS & CRAIN, LTD.

By: Patrick G. Burns
Patrick G. Burns
Registration No. 29,367

15992 U.S. PTO
112503

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d) Fee for Multiple Dependent Claims						\$ 290.00 = \$ <u>0</u>
					Total Filing Fee	\$ <u>770.00</u>

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